2 COMMISSION AND C.	OIA 2 INVES	IIGATIV	E FILE TO	) THIS RI	EQUEST A	AND ANS	WER QL	JESTION
	B. Do	you questio	on the corre	ctness of	the Comm	ission's "	no reason	able cans
	——Yes		No					
	C. If you ar	nswered "y	es" to ques	tion 3B, v	vhat are vo	)Ur reason	s for mee	
Commission's	determinatio	n? Be spec	ific and su	DOORF VOU	T Objection	o with for	, ioi ques	tioning th
repeat the alle	gations made	in your cor	unlaint: the		r objection	is with tac	L Do not	simply
repeat the alle	ınsel.		<del></del>	. LUUR WI	I review y	our compl	aint in co	nsidering
			*					
		1						
Attach additiona					× 1			

## 

	Have you talked with any attorned to
2	Have you talked with any attorney about handling your claim?  Yes
3	entropy of the control of the contro
4 Attorney:	"YES," give the following information about each attorney with whom you talked:
S When:	
Where:	
How (by t	elephone, in person, etc.):
Why attorn	ney was not employed to handle your claim:
Attorney: _	
When:	
Where:	
Wh	ephone, in person, etc.):
willy altorne	y was not employed to handle your claim:
When:	
When: Where:	hone, in person, etc.):
Attorney: When: Where: How (by telep Why attorney	hone, in person, etc.):
When: Where: How (by telep	hone, in person, etc.):was not employed to handle your claim:
When: Where: low (by telep	hone, in person, etc.): was not employed to handle your claim:
When: Where: low (by telep	hone, in person, etc.): was not employed to handle your claim:
When: Where: How (by telep Why attomey	hone, in person, etc.):  was not employed to handle your claim:  nal sheets as needed)

	<b>6 F-1</b>				
2	5. Explain any other efforts you	have made to	contact an attorne	y to handle you	r claim:
3					
4					
5					
6	6. Give any other information wh				
7 att	<ol><li>Give any other information whomey for you:</li></ol>	iich supports y	our application fo	r the court to a	point an
3   C.					
,					
	7. Give the name and address of each	ach attomas			
for	7. Give the name and address of earny purpose:	ach attorney w	no nas represente	d you in the las	10 years
(Atta	nch additional sheets as needed)				
belov	8. I cannot afford to obtain a private	e attorney. The	e details of my fir	ancial situation	are listed
	A. Employment				
	Are you employed now?ye	es <u>X</u> no _	am self-employ	ved .	
	Name and address of employer:				
•					
 !					

"福祉" 文字	If employed how to
	If employed, how much do you earn per month?
	" not employed, give month and year of last employment: Nov 1998
	How much did you earn per month in your last employment? # 2000
. 4	If married, is your spouse employed? yes no
5	If "YES," how much does your ename
6	If you are a minor under age 21
7	If you are a minor under age 21, what is your parents' or guardians' approximate monthly income?
8	
٠,	
9	B. Assets
10	(i) Other Income
11	
12	Have you received within the past 12 months any income from a business, profession or other
13	profited, of in the form of rent payments, interest dividends
	yes yes no
14	If "YES," give the amount received and identify the sources:
5	\$ Received
6	Source
7	
8	
9	
0	
¹ ∦ .	
2∦-	
1	
1	Attach additional sheets as necessary)
	and sheets as necessary)
	DNA PLONY SULONDOUR ASSESSMENT OF THE PROPERTY
"	HIMA-PC DUCS: WORDPERFECT 24126-1 May 27, 1 MPH (1.42) pull

	(ii) <u>Cash</u>
	는 전기에는 그 가는 사람들이 많으면 다음을 다른 <del>그 그를</del> 하는 것이 되었다. 이 나는 사람들에게 하지 않는 사람들은 사람들이 가장 사람들이 다른 것이다.
	Have you any cash on hand or money in savings or checking accounts? X yesn  If "YES," state total amount: 11.84 + .08 = \$1.92
	경찰을 발견되는 경찰 경영을 가지 않는데 그 전투 가는 전 되었습니다. 그 그 그 그들은 전에 가장하게 가장 없는 것이 없는데 되었습니다. 그 그 나는 그는 것이다.
(ex	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable proper
	cluding ordinary household furnishings and clothing)? yes no
	If "YES," give value and describe it:
	<u>Value</u> Description
	그의 경찰 (1985년) 경험 역 전환 (1985년) 최일 전환 (1985년) 전환 (1985년) 1982년 (1985년) 1982년 (1985년) 1982년 (1985년) 1982년 (1985년 전환 (1985년) 1982년 (1985년)
15	C. Obligations and Debts
	(i) <u>Dependents</u>
	Your marital state is: single married widowed, separated or divorced.
	Your total number of dependents is:
	List those person you actually support, your relationship to them, and your monthly
ontri	bution to their support:
	Name/Relationship Monthly Support Pour
	SELF Monthly Support Payment
-	

1	(ii) D	Pehts and NA		
2	List all creditors including heal	Debts and Month	ly Bills	
3	List all creditors, including bank  Creditor	cs, Ioan compan	ies and charge accor	ints, etc.
		<b>J</b> o	tal Debt	Monthly Payr
Mortea	NEW PALACE HOTE	L 6MO	LEASE	#385/m
on Hon				
Others:	NUMEROUS CRET	V		
	IN EXCESS OF	HIA	AGGREGAT	E DEBTS
		1,00,000	USD	
9.	<u>Signature</u>			
	<del>4.01mini.c</del>			
	I declare under penalty of p	perjury that the a	above is true and co	rrect.
	614/2008			
Dated:	21 1/1 500 8			
			The a	alto
			Signature	
(Notarizat	ion is not required)		Signature	
IN A PUDOX SWA	DROPERFEC D23126-1 May 27, Pener (1 47pm)	7		